INTRODUCTION

Following the 1979 publication of *Healthy People: The Surgeon General's Report on Health Promotion* and Disease Prevention, a set of 226 national health objectives was published in the 1980 report, *Promoting Health, Preventing Disease: Objectives for the Nation.* These objectives were established to set a course towards improving health status and reducing health risks. The objectives addressed 1990 targets not only for measurable health status and risk indicators, but also for some areas for which there was no established baseline data available. Crossing 15 health-priority areas, the objectives link mortality, morbidity, preventive interventions, and health-related behaviors.

The 1986 Public Health Service report, *The 1990 Health Objectives for the Nation: A Midcourse Review*, ³ provided an update on the national objectives, commentary on the goals, and an assessment of what would be needed to achieve the 1990 goals. In 1988, the State Center for Health and Environmental Statistics published a similar report, *1990 Health Objectives for the Nation: The North Carolina Course*. ⁴ This report addressed the 30 objectives for which quantifiable health data were available.

In the present report, 1990 Health Objectives for the Nation: The North Carolina Assessment, the same objectives addressed in the 1988 North Carolina report are examined. The format for each objective is as follows: the original 1990 objective, explanatory notes about the calculation or collection of the data, a summary of the findings, related national Year 2000 objectives, and the source of the data. In addition to actual observed data, the projection line used to predict whether N.C. would achieve a particular goal is shown. Whenever possible, data from the U.S. are included. These data show that in many areas, North Carolina and the United States still have a long way to go towards achieving the goals set in 1979. It is hoped that this report will aid policymakers, health planners and other health professionals in making informed decisions.

TECHNICAL NOTES

Resident Data

All North Carolina data shown in this report are for residents of the state, except data obtained from the Office of Chief Medical Examiner and from the Newborn Screening Program, which reflect events occurring in North Carolina. The denominators for population-based rates are midyear population estimates obtained from the Office of State Planning.

Crude Death Rates

The 1990 national mortality objectives were developed on the basis of crude (unadjusted) rates rather than rates adjusted for age, race or other factors. In contrast, the national objectives for the year 2000 use 1940 age-adjusted death rates⁵ (1970 age-adjusted rates are available for cancer sites).